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Gregory H. Hawley

April 28, 1999

Ms. Lois Lerner
Associate General Counsel
Enforcement Division
Federal Election Commission
909 E. Northwest
Washington, D.C. 20463

Re: State Democratic Executive Committee/Alabama Democratic
Party -- Conciliation Procedures

Dear Ms. Lerner:


Enclosed are copies of the stamped cover pages for the following reports sent to the Federal Election Commission by the State Democratic Executive Committee:

- Year End 1997
- April 15, 1998
- July 15, 1998

The report for the October 15, 1998 quarterly filing will be mailed this week. When I receive a stamped copy, I will provide you with the stamped cover page.

If there is any other action we should be taking as part of the conciliation process, please let us know. We look forward to hearing from you.

Very truly yours,


Gregory H. Hawley

GHH/ncr
enclosure

MAY 3 4 14 PM '99

RECEIVED
FEDERAL ELECTION
COMMISSION
OFFICE OF GENERAL
COUNSEL

44-38861-1000

Ms. Lois Lerner
April 28, 1999
Page 2.

cc: Mr. Jack Miller
Mr. Giles Perkins
Mr. Neil Reiff

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) State Democratic Executive Committee of AL		FEDERAL ELECTION COMMISSION MAIL ROOM Jan 13 11 27 PM '99
ADDRESS (number and street) <input checked="" type="checkbox"/> Check if different than previously reported Ste 405, 290 21st Street North		
CITY, STATE and ZIP CODE Birmingham, Alabama 35203		
2. FEC IDENTIFICATION NUMBER C 00005173		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☒ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ 12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election

on _____ in the State of _____

(b) Is this Report an Amendment?

☒ YES

☐ NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	7/1/97 through 12/31/97		
6. (a) Cash on Hand January 1, 19__			\$ 109.36
(b) Cash on Hand at Beginning of Reporting Period		\$ 226.44	
(c) Total Receipts (from Line 19)		\$ 256,301.44	\$ 398,464.68
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 256,527.88	\$ 398,574.04
7. Total Disbursements (from Line 30)		\$ 251,752.79	\$ 393,798.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 4,775.09	\$ 4,775.09
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 46,600.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Giles Perkins, Assistant Treasurer

Signature of Treasurer

Date

Apr 12, 1999

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X

(revised 9/93)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full) State Democratic Executive Committee of Alabama		2. FEC IDENTIFICATION NUMBER C00005173
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 290 21st Street North		
CITY, STATE and ZIP CODE Birmingham, AL 35203		
		3. <input checked="" type="checkbox"/> This committee qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid-Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ Twelfth day report preceding _____ (Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____

in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY

5. Covering Period	01/01/98	through	03/31/98	COLUMN A This Period	COLUMN B Calendar Year-to-date
6. (a) Cash on Hand January 1, 19 98					\$4775.09
(b) Cash on Hand at Beginning of Reporting Period				\$4775.09	
(c) Total Receipts (from Line 19)				\$231317.95	\$231317.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)				\$236093.04	\$236093.04
7. Total Disbursements (from Line 30)				\$215057.65	\$215057.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))				\$21035.39	\$21035.39
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)					
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)				\$ 22,600.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Anthony J. Fant

SARA JANE TACKETT ASST TREASURER

Signature of Treasurer

Date

4-14-99

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Report to penalties of 2 U.S.C. §437g.

FEC FORM 3X
(Revised 9/93)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other than An Authorized Committee
(Summary Page)

FEDERAL ELECTION
COMMISSION FORM NO.

APR 16 3 24 PM '99

1. NAME OF COMMITTEE (in full)

State Democratic Executive Committee of Alabama

ADDRESS (number and street)

Check if different than previously reported.

290 21st Street North

CITY, STATE and ZIP CODE

Birmingham, AL 35203

2. FEC IDENTIFICATION NUMBER

C00005173

3. ☒ This committee qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid-Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding

(Type of Election)

election on in the State of

☐ Thirtieth day report following the General Election on

in the State of

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY

5. Covering Period	04/01/98 through 06/30/98	COLUMN A This Period	COLUMN B Calendar Year-to-date
6. (a) Cash on Hand January 1, 19 98			\$4775.09
(b) Cash on Hand at Beginning of Reporting Period		\$21035.39	
(c) Total Receipts (from Line 19)		\$132352.25	\$363670.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$153387.64	\$368445.29
7. Total Disbursements (from Line 30)		\$147680.94	\$362738.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$5706.70	\$5706.70
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)			
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 2260000	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Anthony J. Fant

Sara Jane Tackett - Assistant Treasurer

Signature of Treasurer

Date

4-15-99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to penalties of 2 U.S.C. §437g.

FEC FORM 3X
(Revised 9/93)

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

APR 13 4 21 PM '99

1. (a) NAME OF COMMITTEE IN FULL State Democratic Executive Committee of Alabama		2. DATE 4/12/99
(b) Number and Street Address Ste 405, 290 21st Street North		3. FEC Identification Number C 00005173
(c) City, State and ZIP Code Birmingham, Alabama 35203		4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

☐ (a) This committee is a principal campaign committee. (Complete the candidate information below.)

☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District
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☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)

☒ (d) This committee is a State committee of the Democratic Party.
(National, State or subordinate) (Democratic, Republican, etc.)

☐ (e) This committee is a separate segregated fund.

☐ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization
☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Sara Jane Tackett	Ste 405 290 21st St N/Bham Al 35203	Asst. Treas

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
Sarah Jane Tackett	Same as Above	Assistant Treasurer
Anthony J Fant	Ste 405, 290 21st St N,; Birmingham Al 35203	Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
First Commercial Bank	P.O. Box 11746, Birmingham Al 35202
Colonial Bank	1928 1st Avenue N, Birmingham Al 35203

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Giles Perkins, Asst Treas	SIGNATURE OF TREASURER 	DATE 4/12/99
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.